

The Isolated Thyroid Nodule



This department covers selected points from the 2006 Endocrine Update: A CME Day from the Division of Endocrinology and Metabolism at McMaster University and the University of Western Ontario, June 2006.
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Managing a thyroid nodule

The management of thyroid nodules has been the subject of intense debate in the past number of years. In an attempt to provide evidence-based directives, a number of organizations have published guidelines on the management of thyroid nodules and cancer. The overall objective of these guidelines is simple: detect cancer early and reliably. Yet, despite the myriad of guidelines, achievement of that objective remains elusive. The present set of guidelines all debunk once sacred dogmas. A multinodular gland carries no less a risk for malignancy than does a solitary nodule; non-palpable nodules carry just as much risk as palpable ones and there is no such thing as a dominant nodule.

Efficacy of thyroid guidelines

In terms of providing an effective approach to managing thyroid nodules in the real world, the guidelines are ineffective. Nodules are highly prevalent and although thyroid cancer is a rare disease, its incidence is on the rise. Disease-free survival is excellent for most patients, but a minority of patients may fare poorly.

At present, the only reliable way of identifying those with thyroid nodules or cancer is by close observation and re-evaluation.

It is impossible to provide the gold standard diagnostic test (fine needle aspirate/biopsy) to all patients with thyroid nodules, irrespective of a size limitation.

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How to approach thyroid nodules

Real breakthrough in managing thyroid nodules will come from two lines of research:

- Improved imaging modalities
- Improved cytology

Finally, it may be that thyroid nodules are best approached, not as an individual problem, but as a public health issue where limited resources are matched to the best possible group of patients, but with the recognition that there may be missed cases in the process. **Dx**

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